#### Case 20-70352-JAD Doc 50 Filed 04/20/22 Entered 04/20/22 14:20:05 Desc Main Document Page 1 of 31

Official Form 106A/B  Schedule A/B: Property In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category withink it fits best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if kn Answer every question.  Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In  1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?  No. Go to Part 2.  Yes. Where is the property?  What is the property? Check all that apply   Do not deduct secured claims or exempting the amount of any secured claims or exempting condominium or cooperative   Duplex or multi-unit building   Condominium or cooperative   Creditors Who Have Claims Secured by its property?   Condominium or cooperative   Current value of the entire property?   Current value of the entire p			200	ountent rage rolor				
Debtor 2 (Spouse, if filing)  Pist Name  Middle Name  Last Name  United States Bankruptcy Court for the:  WESTERN DISTRICT OF PENNSYLVANIA  Case number  20-70352  Check is amended  Official Form 106A/B  Schedule A/B: Property  12/15  n each category, separately list and describe items. List an asset only once. If an asset filts in more than one category, list the asset in the category in think if it the best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct normation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if knawer very question.  Port 4: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an interest in  Do you own or have any legal or equitable interest in any residence, building, land, or similar property?  No. Go to Part 2.  Yes. Where is the property?  What is the property? Check all that apply   Single-family home   Duplex or multi-unit building   Condominium or cooperative   Duplex or multi-unit building   Condominium or cooperative   Current value of the entire property   Current value of the entir	this information to	identify your case and	this filing:					
Debtor 2 (Spouse, if filling)  First Name  Middle Name  Last Name  United States Bankruptcy Court for the: WESTERN DISTRICT OF PENNSYLVANIA  Case number  20-70352  Check I amende  Offficial Form 106A/B  Schedule A/B: Property  12/15	or 1 Wini	fred H Lynch						
United States Bankruptcy Court for the: WESTERN DISTRICT OF PENNSYLVANIA  Case number 20-70352			dle Name	Last Name				
United States Bankruptcy Court for the: WESTERN DISTRICT OF PENNSYLVANIA  Case number 20-70352	The second secon	ame Mid	dle Name	Last Name				
Case number 20-70352 Check all that apply  Islander Beach Resort  1601 S. Atlantic Avenue  Street address, if available, or other description  New Smyrna  Beach FL 32169-0000  City State Zip Code  Who has an interest in the property? Check one  Debtor 1 only  Check in amends  12/15  12/16  12/16  12/16  12/17  12/15  12/16  12/16  12/17  12/15  12/16  12/16  12/16  12/17  12/15  12/16  12/16  12/17  12/15  12/16		Court for the MESTER	N DISTRI	CT OF DENNISYLVANIA				
Official Form 106A/B  Schedule A/B: Property  12/15  neach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category withink it fits best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct formation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if kn inswer every question.  Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest in  Do you own or have any legal or equitable interest in any residence, building, land, or similar property?  No. Go to Part 2.  Yes. Where is the property?  What is the property? Check all that apply is single-family home pulpex or multi-unit building Condominium or cooperative  New Smyrna  Beach FL 32169-0000  City State ZIP Code Investment property  Who has an interest in the property? Check one Debtor 1 only  Describe the nature of your ownership (such as fee simple, tenancy by the enal life estate), if known.	d States Bankruptcy	Court for the:	N DISTRIC	CT OF PENNSTLVANIA				
Schedule A/B: Property  12/15  12/15  Schedule A/B: Property  12/15  12/16	number _20-7035	2						Check if this is ar
n each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category whink it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally resp		Q					18	amended filing
n each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category hink it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally responsible for supplying correct filing together, both are equally respo								
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In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category whink it fits best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if kn answer every question.  Part 11 Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest in  1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?    No. Go to Part 2.	nedule A/	R. Property					1	12/15
hink it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct formation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if kn new page) in the property?    Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In    Do you own or have any legal or equitable interest in any residence, building, land, or similar property?    No. Go to Part 2.	According to the control of the cont							
Single-family home		erty?						
Single-family home			What i	is the property? Check all that apply				
Street address, if available, or other description  Condominium or cooperative  Manufactured or mobile home  Land  Land  Current value of the entire property?  State ZIP Code  Investment property  Timeshare  Other  Who has an interest in the property? Check one  Debtor 1 only	slander Beach R	esort			Do not dedi	educt secured claims or exemptions. Put		
New Smyrna Beach  FL 32169-0000  City  State  ZIP Code  Investment property  Timeshare  Other  Who has an interest in the property? Check one Debtor 1 only  Condominium or cooperative  Current value of the entire property?  portion your spray state of the entire property?  Describe the nature of your ownership (such as fee simple, tenancy by the enal life estate), if known.			_		the amount	unt of any secured claims on Schedule D		s on Schedule D:
Beach FL 32169-0000  City State ZIP Code Investment property \$5,000.00 \$  Timeshare Other Who has an interest in the property? Check one Debtor 1 only	Street address, if available,	or other description		Condominium or cooperative	Orcanors VI	mo mave cham	10 000	area by 1 Toperty.
Beach FL 32169-0000  City State ZIP Code Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only  Land entire property? portion your \$5,000.00 \$  Describe the nature of your ownership (such as fee simple, tenancy by the en a life estate), if known.	Now Smyrna			Manufactured or mobile home	E-Qui-View de Linden			
Timeshare  Other  Who has an interest in the property? Check one  Describe the nature of your ownership (such as fee simple, tenancy by the en a life estate), if known.		FL 32169-0000		Land				ent value of the ion you own?
Other Describe the nature of your ownership (such as fee simple, tenancy by the en a life estate), if known.  Debtor 1 only	City	State ZIP Code		Investment property	\$	5,000.00		\$5,000.00
Who has an interest in the property? Check one  Debtor 1 only  Debtor 3 Other  (such as fee simple, tenancy by the en a life estate), if known.			靈	Timeshare	Describe th	ne nature of v	our ov	vnershin interest
Debtor 1 only					(such as fe	e simple, ten		
			-	NAME OF THE OWNER OF THE PARTY	a life estate	e), if Known.		
Volacia — Debitor 2 only	/olusia		-	We have been about •				
County Debtor 1 and Debtor 2 only				•				
At least one of the debtors and another  Check if this is community proper  (see instructions)			_				munity	y property
Other information you wish to add about this item, such as local					n, such as lo	cal		
property identification number:			proper	rty identification number:				

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Deb	otor 1 Winifre	d H Lynch			Ca	se number (if known) 20-	70352	
	If you own or	have more	than one, list h	ere:				
1.2	192 Kibler Lake Road Street address, if available, or other description		What	is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative	Do not deduct secured cl the amount of any secure Creditors Who Have Clair	d claims on Schedule D:		
	<b>Flinton</b> City	PA State	16640-0000 ZIP Code	Who	Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only	Current value of the entire property? \$3,500.00  Describe the nature of y (such as fee simple, ten a life estate), if known.	Current value of the portion you own? \$3,500.00  rour ownership interest ancy by the entireties, or	
	County				Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another rinformation you wish to add about this iterty identification number:	Check if this is community property (see instructions) em, such as local		
1.3	If you own or have more than one, list he				is the property? Check all that apply Single-family home	Do not deduct secured cla	aims or exemptions. Put	
	Street address, if avai	lable, or other des	cription		Duplex or multi-unit building Condominium or cooperative	the amount of any secured claims on Schedule Creditors Who Have Claims Secured by Proper		
	Flinton City	PA State	<b>16640-0000</b> ZIP Code		Manufactured or mobile home  Land Investment property Timeshare Other		Current value of the portion you own? \$70,000.00  our ownership interest ancy by the entireties, or	
	<b>Cambria</b> County			□ □ Other	has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another information you wish to add about this it	a life estate), if known.  Check if this is com (see instructions)  cem, such as local	nmunity property	

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Debtor	1 Winifred H	Lynch				Case n	umber (if known) 20-	70352	
1.4 Th 13	f you own or have more than one, list he he he had been he had bee				Duplex or multi-unit building Condominium or cooperative		Do not deduct secured claims or exemptions the amount of any secured claims on Schedu Creditors Who Have Claims Secured by Proj		
Vi City	irginia Beach	VA State	<b>23451-0000</b> ZIP Code	Who	Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check Debtor 1 only		Current value of the entire property? \$5,000.00  Describe the nature of y (such as fee simple, ten a life estate), if known.	Current value of the portion you own? \$5,000.00  our ownership interest ancy by the entireties, or	
	Virginia Beach Cit  County				Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another information you wish to add about the the the theory identification number:		☐ Check if this is community property (see instructions) tem, such as local		
1.5 Fc 18	If you own or have more than one, list he Fox Run Townhomes 180 Herman Wilson Road Street address, if available, or other description			What is the property? Check all that apply  Single-family home Duplex or multi-unit building Condominium or cooperative			Do not deduct secured claims or exemptions. the amount of any secured claims on Schedul Creditors Who Have Claims Secured by Prop		
City	ake Lure	NC State	28746-0000 ZIP Code	Who	☐ Investment property ☐ Timeshare		Current value of the entire property? \$5,000.00  Describe the nature of y (such as fee simple, ten a life estate), if known.	Current value of the portion you own? \$5,000.00  our ownership interest ancy by the entireties, or	
_	utherford <sub>unty</sub>				Debtor 2 only Debtor 1 and Debtor 2 only		Check if this is com (see instructions) such as local	munity property	

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Deb	otor 1 V	Vinifred H L	ynch				Case number (if know	) <u>20</u> -	70352
	If you o	wn or have	more	than one, lis	t here:				
1.6						t is the property? Check all that apply			
	Summer Bay Resorts					Single-family home			aims or exemptions. Put
	17805 US Highway 192W Street address, if available, or other description					Duplex or multi-unit building			ed claims on Schedule D: ims Secured by Property.
	Street addre	ess, if available, or	otner des	cription		Condominium or cooperative			codarea zy r reporty.
						Manufactured or mobile home			
	Orlando	0	FL	34714-000	) [	Land	Current value of entire property		Current value of the portion you own?
	City		State	ZIP Code		Webselline and The Control of the Co	\$10,0		\$10,000.00
	Oity		State	Zii Code		Timeshare	φ10,0	70.00	φ10,000.00
									your ownership interest
					_		. 116		nancy by the entireties, or
					VVIIO	has an interest in the property? Check Debtor 1 only	one a mo ostato), n	MIIOWIII.	
	Lake						-		
	County					Dobtor 2 omy			
	County					1			nmunity property
								ins)	
						er information you wish to add about the erty identification number:	nis item, such as local		
						your entries from Part 1, including er here			\$98,500.00
some	eone else o	drives. If you le	ease a		eport it on S	iny vehicles, whether they are reg Schedule G: Executory Contracts an orcycles		o uny v	omoco you omi max
3.1	Make:	Nissan			Who has a	an interest in the property? Check one			laims or exemptions. Put
	Model:	Altima S			■ Debtor	1 only			ed claims on Schedule D: ims Secured by Property.
	Year:	2015			☐ Debtor	•			
	Approxin	nate mileage:		25000		1 and Debtor 2 only	Current value of entire property		Current value of the portion you own?
	Other inf	formation:			_	one of the debtors and another			
						if this is community property tructions)	\$11,00	00.00	\$11,000.00
5 A .p	No Yes  Add the do ages you  3: Descrit	oats, trailers, r ollar value of t have attache	notors, the por d for P	personal wate tion you own art 2. Write th	rcraft, fishi for all of y at number	reational vehicles, other vehicles, ng vessels, snowmobiles, motorcycles our entries from Part 2, including references of the following items?	e accessories any entries for		\$11,000.00  Current value of the portion you own?
									Do not deduct secured claims or exemptions.

Official Form 106A/B

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D	ebtor 1	Winifred H L	ynch	Case number (if known)	20-70352
6.	Exampl □ No	nold goods and toles: Major appliar	urnishings ices, furniture, linens, china, kitchenware		
			Household goods and furnishings		\$4,825.00
7.	■ No	les: Televisions a including cell	nd radios; audio, video, stereo, and digital equipment; computers, phones, cameras, media players, games	printers, scanners; music c	ollections; electronic devices
8.	Collecti Example  □ No		figurines; paintings, prints, or other artwork; books, pictures, or ot ons, memorabilia, collectibles	ther art objects; stamp, coin,	or baseball card collections;
			Books, pictures, artwork		\$200.00
9.	Example No	nent for sports an les: Sports, photo musical instru	graphic, exercise, and other hobby equipment; bicycles, pool table	es, golf clubs, skis; canoes a	and kayaks; carpentry tools;
10	■ No		s, shotguns, ammunition, and related equipment		
11.	□ No		othes, furs, leather coats, designer wear, shoes, accessories		
			Women's clothing		\$50.00
12.	□ No		welry, costume jewelry, engagement rings, wedding rings, heirloor	m jewelry, watches, gems, g	old, silver
			Furs and jewelry		\$100.00
13.	Examp ☐ No	arm animals ples: Dogs, cats, l	pirds, horses		
			Chihuahua		\$50.00
14.	No No	ther personal and	d household items you did not already list, including any heal	Ith aids you did not list	

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Debtor 1	Winifre	d H Lynch		Case number (if known)	20-70352	
				Part 3, including any entries for pa	ges you have attached	\$5,225.00
Part 4:	Describe Your	Financial Asse	ets			
Laborator Street, Square, Squa				n any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No	mples: Money	•		ome, in a safe deposit box, and on h	and when you file your petitio	n
					Cash	\$20.00
Exai	institu	ing, savings, o tions. If you ha		counts; certificates of deposit; shares is with the same institution, list each.  Institution name:	in credit unions, brokerage ho	ouses, and other similar
		17.1.	Checking	Captial One		\$7.00
		17.2.	Savings	Captial One		\$400.00
Exar	mples: Bond f		icly traded stocks nent accounts with bi	rokerage firms, money market accour	nts	
	publicly trad venture	led stock and	l interests in incorp	orated and unincorporated busine	esses, including an interest	in an LLC, partnership, and
_	s. Give speci		n about them ame of entity:		% of ownership:	
Neg	otiable instrur	ments include	personal checks, ca	otiable and non-negotiable instrum shiers' checks, promissory notes, and ansfer to someone by signing or deliv	d money orders.	
	s. Give specif	fic information Iss	about them suer name:			
		n <b>sion accou</b> r sts in IRA, ERI		403(b), thrift savings accounts, or oth	er pension or profit-sharing p	lans
	s. List each a	ccount separa Type	ately. of account:	Institution name:		
Your Exar	share of all u		its you have made s	o that you may continue service or us public utilities (electric, gas, water), t		es, or others
■ No □ Yes	S			Institution name or individual:		
23. Annu	uities (A contr	ract for a perio	odic payment of mon	ey to you, either for life or for a numb	er of years)	
	S	Issuer nan	ne and description.			

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D	ebtor 1	Winifred I	H Lynch		Case number (if known)	20-70352
24				alified ABLE program, or u	nder a qualified state tuition prog	ram.
	No ☐ Yes		<ol> <li>529A(b), and 529(b)(1).</li> <li>Institution name and description</li> </ol>	Separately file the records o	of any interests.11 U.S.C. § 521(c):	
25	. Trusts	, equitable or	future interests in property (ot	her than anything listed in I	line 1), and rights or powers exerc	isable for your benefit
	☐ Yes.	Give specific	information about them			
26			s, trademarks, trade secrets, and domain names, websites, proceed			
	☐ Yes.	Give specific	information about them			
27.	. Licens Examµ ■ No	<b>es, franchise</b> bles: Building բ	es, and other general intangible permits, exclusive licenses, coope	s erative association holdings, li	iquor licenses, professional licenses	
		Give specific	information about them			
M	oney or	property owe	ed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	unds owed to	o you			
	☐ Yes.	Give specific i	information about them, including	whether you already filed the	e returns and the tax years	
29.	Examp No		or lump sum alimony, spousal su	pport, child support, maintena	ance, divorce settlement, property se	ottlement
30.		oles: Unpaid w	neone owes you vages, disability insurance payme unpaid loans you made to some		ay, vacation pay, workers' compensa	ation, Social Security
	☐ Yes.	Give specific	information			
31.		ts in insurand bles: Health, di		avings account (HSA); credit	, homeowner's, or renter's insurance	i
		Name the insu	urance company of each policy ar Company name:	d list its value.	Beneficiary:	Surrender or refund value:
32.	If you a		perty that is due you from some ciary of a living trust, expect proce		icy, or are currently entitled to receiv	e property because
	■ No □ Yes.	Give specific	information			
33.			I parties, whether or not you has, employment disputes, insurance		demand for payment	
		Describe eac	h claim			
34.	Other o	ontingent an	nd unliquidated claims of every	nature, including countercl	aims of the debtor and rights to s	et off claims
	☐ Yes.	Describe each	h claim			

Official Form 106A/B

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Deb	tor 1	Winifred H Lynch		Case number (if known)	20-70352							
35. /	Any fin	ancial assets you did not already list										
	No											
	Yes.	Give specific information										
36.		ne dollar value of all of your entries from Part 4, includin rt 4. Write that number here			\$427.00							
Part	Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.											
37. D	o you o	wn or have any legal or equitable interest in any business-relate	ed property?									
	No. Go	to Part 6.										
	Yes. G	o to line 38.										
Part		cribe Any Farm- and Commercial Fishing-Related Property You u own or have an interest in farmland, list it in Part 1.	Own or Have an Intere	est In.								
46. I	Do vou	own or have any legal or equitable interest in any farm-	or commercial fishi	ng-related property?								
		Go to Part 7.										
	-	Go to line 47.										
Part	7:	Describe All Property You Own or Have an Interest in That You	ı Did Not List Above									
		have other property of any kind you did not already list? les: Season tickets, country club membership	?									
	No											
	Yes. (	Give specific information										
				1								
54.	Add th	ne dollar value of all of your entries from Part 7. Write th	at number here		\$0.00							
Part	8:	List the Totals of Each Part of this Form										
55.	Part 1	: Total real estate, line 2			\$98,500.00							
56.	Part 2	: Total vehicles, line 5	\$11,000.00									
57.	Part 3	: Total personal and household items, line 15	\$5,225.00									
58.	Part 4	: Total financial assets, line 36	\$427.00									
59.	Part 5	: Total business-related property, line 45	\$0.00									
60.	Part 6	: Total farm- and fishing-related property, line 52	\$0.00									
61.	Part 7	: Total other property not listed, line 54 +	\$0.00									
62.	Total	personal property. Add lines 56 through 61	\$16,652.00	Copy personal property to	stal \$16,652.00							
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$115.152.00							

Official Form 106A/B Schedule A/B: Property

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Fill in this informa					
Debtor 1	Winifred H Lynch				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bank	cruptcy Court for the:	WESTERN DISTRICT OF PE	NNSYLVANIA		
Case number 20	)-70352				
(if known)	J-1 0332				☐ Check if this is an amended filing

#### Official Form 106C

#### Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	art 1: Identify the Property You Claim as E	empt								
1.	Which set of exemptions are you claiming	? Check one only, eve	n if yo	our spouse is filing with you.						
	☐ You are claiming state and federal nonbar	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)						
	You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)								
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.									
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption					
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.						
	Islander Beach Resort 1601 S. Atlantic Avenue New Smyrna Beach,	\$5,000.00		\$0.00	11 U.S.C. § 522(d)(5)					
	FL 32169 Volusia County Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit						
	192 Kibler Lake Road Flinton, PA 16640 Cambria County	\$3,500.00		\$3,500.00	11 U.S.C. § 522(d)(5)					
	Line from Schedule A/B: 1.2			100% of fair market value, up to any applicable statutory limit						
	184 Kibler Lake Road Flinton, PA 16640 Cambria County	\$70,000.00		\$25,150.00	11 U.S.C. § 522(d)(1)					
	Line from Schedule A/B: 1.3			100% of fair market value, up to any applicable statutory limit						
	The Colony 1301 Atlantic Avenue Virginia Beach, VA 23451 Virginia	\$5,000.00	35	\$0.00	11 U.S.C. § 522(d)(5)					
	Beach Cit County Line from Schedule A/B: 1.4			100% of fair market value, up to any applicable statutory limit						
	Fox Run Townhomes 180 Herman Wilson Road Lake Lure, NC 28746	\$5,000.00		\$0.00	11 U.S.C. § 522(d)(5)					
	Rutherford County Line from Schedule A/B: 1.5			100% of fair market value, up to any applicable statutory limit						

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btor 1 Winifred H Lynch			Case number (if known)	20-70352
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Summer Bay Resorts 17805 US Highway 192W Orlando, FL 34714	\$10,000.00		\$0.00	11 U.S.C. § 522(d)(5)
Lake County Line from Schedule A/B: 1.6			100% of fair market value, up to any applicable statutory limit	
2015 Nissan Altima S 25000 miles Line from Schedule A/B: 3.1	\$11,000.00		\$1,325.60	11 U.S.C. § 522(d)(2)
			100% of fair market value, up to any applicable statutory limit	
Household goods and furnishings Line from Schedule A/B: 6.1	\$4,825.00		\$4,825.00	11 U.S.C. § 522(d)(3)
			100% of fair market value, up to any applicable statutory limit	
Books, pictures, artwork Line from Schedule A/B: 8.1	\$200.00		\$200.00	11 U.S.C. § 522(d)(3)
			100% of fair market value, up to any applicable statutory limit	
Women's clothing Line from Schedule A/B: 11.1	\$50.00	×	\$50.00	11 U.S.C. § 522(d)(3)
			100% of fair market value, up to any applicable statutory limit	
Furs and jewelry Line from Schedule A/B: 12.1	\$100.00		\$100.00	11 U.S.C. § 522(d)(4)
			100% of fair market value, up to any applicable statutory limit	
Chihuahua Line from Schedule A/B: 13.1	\$50.00		\$50.00	11 U.S.C. § 522(d)(3)
			100% of fair market value, up to any applicable statutory limit	
Cash Line from Schedule A/B: 16.1	\$20.00		\$20.00	11 U.S.C. § 522(d)(5)
			100% of fair market value, up to any applicable statutory limit	
Checking: Captial One Line from Schedule A/B: 17.1	\$7.00		\$7.00	11 U.S.C. § 522(d)(5)
			100% of fair market value, up to any applicable statutory limit	
Savings: Captial One Line from Schedule A/B: 17.2	\$400.00		\$400.00	11 U.S.C. § 522(d)(5)
			100% of fair market value, up to any applicable statutory limit	
Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every			led on or after the date of adjustmen	t.)
☐ Yes. Did you acquire the property cover ☐ No	red by the exemption wi	thin 1,	215 days before you filed this case?	
☐ Yes				

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Fill in this information to identify yo	ur case:	3 S. C.		
Debtor 1 Winifred H Lyn			_	
First Name Debtor 2	Middle Name Last Nam	е		
(Spouse if, filing) First Name	Middle Name Last Nam	е	_	
United States Bankruptcy Court for the	WESTERN DISTRICT OF PENNSYLVA	NIA	-	
Case number 20-70352				
(if known)			_	if this is an
			amend	ded filing
Official Form 106D				
Schedule D: Creditors	s Who Have Claims Secu	red by Propert	ty	12/15
Be as complete and accurate as possible is needed, copy the Additional Page, fill it number (if known).	If two married people are filing together, both a out, number the entries, and attach it to this for	re equally responsible for s m. On the top of any additio	upplying correct informa onal pages, write your na	ition. If more space me and case
1. Do any creditors have claims secured b	y your property?			
$\square$ No. Check this box and submit	this form to the court with your other schedule	s. You have nothing else	to report on this form.	
Yes. Fill in all of the information	below.			
Part 1: List All Secured Claims				
2. List all secured claims. If a creditor has for each claim. If more than one creditor ha much as possible, list the claims in alphabet	more than one secured claim, list the creditor separ s a particular claim, list the other creditors in Part 2. ical order according to the creditor's name.	ately As Amount of claim Do not deduct the value of collateral.	Column B  Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 Carvana	Describe the property that secures the claim:	\$9,000.00	\$11,000.00	\$0.00
Creditor's Name	2015 Nissan Altima S 25000 miles			
P.O. Box 29018	As of the date you file, the claim is: Check all the apply.	ıt		
Phoenix, AZ 85038	Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage of	r secured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lie	1)		
☐ At least one of the debtors and another☐ Check if this claim relates to a	☐ Judgment lien from a lawsuit☐ Other (including a right to offset)			
community debt				
Date debt was incurred 7/2020	Last 4 digits of account number 40	01		
2.2 Club Exploria	Describe the property that secures the claim:	\$13,206.40	\$5,000.00	\$8,206.40
Creditor's Name	Islander Beach Resort 1601 S.	ψ10,200.40	Ψο,οσο.σσ	ψ0,200.40
	Atlantic Avenue New Smyrna			
D.O. D	Beach, FL 32169 Volusia County As of the date you file, the claim is: Check all tha	<u> </u>		
P.O. Box 29352 Phoenix, AZ 85038-9352	apply.	•		
Number, Street, City, State & Zip Code	☐ Contingent ☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage o car loan)	r secured		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only				
At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lier ☐ Judgment lien from a lawsuit	·)		
☐ Check if this claim relates to a	Other (including a right to offset)			
community debt				
Date debt was incurred 2018	Last 4 digits of account number 914	14		

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Debtor 1 Winifred H Lynch		Case number (if known)	20-70352	
First Name Middle N	ame Last Name			
2.3 Quicken Loans Creditor's Name	Describe the property that secures the claim	n: \$46,000.00	\$70,000.00	\$0.00
Glodioi 3 Name	184 Kibler Lake Road Flinton, PA 16640 Cambria County			
1050 Woodward Avenue Detroit, MI 48226	As of the date you file, the claim is: Check all apply.  Contingent	that		
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	<ul> <li>An agreement you made (such as mortgage car loan)</li> </ul>	e or secured		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	_	P \		
At least one of the debtors and another	Statutory lien (such as tax lien, mechanic's l	lien)		
☐ Check if this claim relates to a	☐ Judgment lien from a lawsuit☐ Other (including a right to offset)			
community debt	Other (including a right to onset)			
Date debt was incurred 2016	Last 4 digits of account number 7	299		
2.4 White Township Tax		****	4	
Creditor's Name	Describe the property that secures the claim	n: \$340.00	\$70,000.00	\$0.00
Creditor's Name	192 Kibler Lake Road Flinton, PA 16640 Cambria County			
P.O. Box 211	As of the date you file, the claim is: Check all t	that		
Flinton, PA 16640	apply.  Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage car loan)	or secured		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	_ == 5=			
At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's li☐ Judgment lien from a lawsuit	ien)		
☐ Check if this claim relates to a	-	rty Tayos		
community debt	Other (including a right to offset)	rty Taxes		
Date debt was incurred 2020	Last 4 digits of account number 7	562		
Add the dollar value of your entries in C	olumn A on this page. Write that number here:	: \$68,546.4	10	
If this is the last page of your form, add		\$68,546.4	_	
Write that number here:		400,040.4		
Part 2: List Others to Be Notified fo	r a Debt That You Already Listed			
trying to collect from you for a debt you or	e notified about your bankruptcy for a debt the we to someone else, list the creditor in Part 1, you listed in Part 1, list the additional creditor is page.	and then list the collection agend	cy here. Similarly, if you ha	ave more
Name, Number, Street, City, State & Bridgecrest	Zip Code C	on which line in Part 1 did you enter	the creditor? 2.1	
P.O. Box 53087 Phoenix, AZ 85072	L	ast 4 digits of account number		

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				_
Fill in this in	formation to identify your	case:		
Debtor 1	Winifred H Lynch			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Nesse	Lost Name	
(Spouse II, IIIIng)	First Name	Middle Name	Last Name	
United States	s Bankruptcy Court for the:	WESTERN DISTRICT	Γ OF PENNSYLVANIA	
Case numbe	r <b>20-70352</b>			
(if known)	20-70332			☐ Check if this is an
				amended filing
0	4005/5			
	orm 106E/F			40445
Schedule	e E/F: Creditors W	ho Have Unsec	cured Claims	12/15
Schedule G: E: Schedule D: Ci left. Attach the name and case	xecutory Contracts and Unexpreditors Who Have Claims Sec Continuation Page to this page number (if known).	ired Leases (Official Form ured by Property. If more e. If you have no informat	m. Also list executory contracts on Schedule A/B: In 106G). Do not include any creditors with partially space is needed, copy the Part you need, fill it out, tion to report in a Part, do not file that Part. On the to the contract of th	secured claims that are listed in number the entries in the boxes on the
	st All of Your PRIORITY Un	24 S 201 B 0 D0		
_	editors have priority unsecure	d claims against you?		
No. Go	to Part 2.			
☐ Yes.				
Part 2: Lis	st All of Your NONPRIORIT	Y Unsecured Claims		
and the same of th	editors have nonpriority unsec		9	
□ No. Yo	u have nothing to report in this p	art. Submit this form to the	court with your other schedules.	
Yes.				
unsecured	claim, list the creditor separately	for each claim. For each c	rder of the creditor who holds each claim. If a credit laim listed, identify what type of claim it is. Do not list cla t 3.If you have more than three nonpriority unsecured c	aims already included in Part 1. If more
				Total claim
	erica Airlines Federal Cr			<b>****</b>
4.1 Unic	on riority Creditor's Name	Last 4 dig	its of account number	\$200.00
	Box 619001	When was	s the debt incurred?	
	as, TX 75261-9001			<del></del>
	per Street City State Zip Code	As of the	date you file, the claim is: Check all that apply	
-	incurred the debt? Check one.			
■ De	ebtor 1 only	☐ Conting	gent	
□ De	ebtor 2 only	☐ Unliqui	dated	
□ De	ebtor 1 and Debtor 2 only	☐ Dispute	ed	
☐ At	least one of the debtors and and	, tiloi	ONPRIORITY unsecured claim:	
	neck if this claim is for a comm			
debt	claim subject to offset?		ions arising out of a separation agreement or divorce the	nat you did not
	SCORPORATION STATE OF THE STATE		vriority claims	<b>.</b>
■ No	)	Li Debts t	to pension or profit-sharing plans, and other similar debi	ıs
☐ Ye	es	Other.	Other Specify Over draft protection	

Best Case Bankruptcy

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Debto	<sup>1</sup> Winifred H Lynch		Case number (if known)	20-70352	
4.2	American Airlines FCU Nonpriority Creditor's Name P.O. Box 660493	Last 4 digits of account number  When was the debt incurred?	<u>1567</u> 2020	_	\$11,775.08
	Dallas, TX 75266-0493  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim			
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Disputed  Type of NONPRIORITY unsecure ☐ Student loans —			
	debt Is the claim subject to offset?  No  Yes	☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharing	g plans, and other similar de		
	☐ Yes	Other. Specify Credit Card	1		
4.3	American Airlines Federal Credit Union Nonpriority Creditor's Name	Last 4 digits of account number	0000	_	\$7,000.00
	P.O. Box 619001 MD 2100 DFW Airport Dallas, TX 75261-9001 Number Street City State Zip Code	When was the debt incurred?	2020		
	Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	$\square$ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a sepa			
	No	☐ Debts to pension or profit-sharing		ebts	
	Yes	Other. Specify Line of Cre	dit		
4.4	American Airlines Federal Credit Union Nonpriority Creditor's Name	Last 4 digits of account number	0050		\$1,000.00
	P.O. Box 619001 MD 2100	When was the debt incurred?	2020		
	DFW Airport Dallas, TX 75261-9001 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce	that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar de	bts	
	☐ Yes	Other. Specify			

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Debto	<sup>1</sup> Winifred H Lynch	Case number (if known) 20-70352	
4.5	American Express Nonpriority Creditor's Name	Last 4 digits of account number 1008	\$780.94
	P.O. Box 1270 Newark, NJ 07101-1270	When was the debt incurred? 2020	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Contingent	
	□ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim:  ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit Card	
4.6	Barclays	Last 4 digits of account number 4006	\$715.18
	Nonpriority Creditor's Name P.O. Box 13337 Philadelphia, PA 19101-3337	When was the debt incurred? 2020	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit Card	
4.7	Barclays Nonpriority Creditor's Name	Last 4 digits of account number 3057	\$1,950.79
	P.O. Box 13337 Philadelphia, PA 19101-3337	When was the debt incurred? 2020	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Credit Card	

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Debtor	1 Winifred H Lynch	Case number (if known) 20-70352	
4.8	Nonpriority Creditor's Name 4150 N,. Drinkwater Blvd. Suite 200	Last 4 digits of account number 9144  When was the debt incurred?	\$939.49
	Scottsdale, AZ 85251-3643  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	Collection account for dues and maintenance fees for timeshare	-
4.9	Blackwell Recovery Nonpriority Creditor's Name	Last 4 digits of account number 9767	\$4,037.21
	4150 N,. Drinkwater Blvd. Suite 200	When was the debt incurred?	-
	Scottsdale, AZ 85251-3643  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	76 of the date you me, the drain is. Officer all that apply	
	Debtor 1 only	□ Contingent	
	Debtor 2 only	□ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Collection account for dues and maintenance fees for timeshare	-
4.1	Capio Partners Nonpriority Creditor's Name	Last 4 digits of account number	\$40.00
	2222 Texoma Parkway Suite 150	When was the debt incurred?	
	Sherman, TX 75090  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	□ Contingent	
	Debtor 2 only	□ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collection account for medical bills	

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Debto	r1 Winifred H Lynch	Case number (if known) 20-7	0352
4.1 1	Glendale Yearound  Nonpriority Creditor's Name P.O. Box 89 Flinton, PA 16640  Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes	Case number (if known)  Last 4 digits of account number  H222  When was the debt incurred?  2020  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify  Homeowner's Association fees	\$768.99
4.1	GM Financial  Nonpriority Creditor's Name 801 Cherry Street Suite 3500  Fort Worth, TX 76102  Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes	Last 4 digits of account number 2793  When was the debt incurred? 2016  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Auto Loan	\$1,685.32
4.1	Joseph A. Hoetzlein  Nonpriority Creditor's Name  185 Cougar Lane Pikeville, NC 27863  Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Last 4 digits of account number  When was the debt incurred?  12/31/09  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you report as priority claims Debts to pension or profit-sharing plans, and other similar debts	\$6,306.67
	□Yes	Other. Specify Promissory Note	

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Debtor	1 Winifred H Lynch	Case number (if known) 20-70352	
4.1	Kenneth R. Hoetzlein	Last 4 digits of account number	\$6,306.67
	Nonpriority Creditor's Name 330 Waren Street Monongahela, PA 15063	When was the debt incurred? 12/31/09	
9	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Promissory Note	
4.1	Kohl's Payment Center	Last 4 digits of account number 7578	\$536.27
5	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ000.27
	P.O. Box 2983	When was the debt incurred? 2020	
	Milwaukee, WI 53201-2983  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Oneck an that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit Card	
4.1	Lawrence A. Hoetzlein, Jr.	Last 4 digits of account number	\$6,306.67
6	Nonpriority Creditor's Name		Ψο,σσοισ.
	3480 County Road 8	When was the debt incurred? 12/31/09	
	Montour Falls, NY 14865  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, as of the date you me, the claim to check an that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Promissory Note	

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Debto	1 Winifred H Lynch	Case number (if known) 20-70352	
4.1	Lowes	Last 4 digits of account number 8215	\$3,222.78
	Nonpriority Creditor's Name P.O. Box 530914 Atlanta, GA 30353	When was the debt incurred? 2020	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit Card	
4.1	Marguerite I. Ethridge	Last 4 digits of account number	\$6,306.67
	Nonpriority Creditor's Name 4728 Rivercreek Run	When was the debt incurred? 12/31/09	
	Raleigh, NC 27604  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Prmissory Note	
4.1	Mary D. McLean	Last 4 digits of account number	\$6,306.67
	Nonpriority Creditor's Name 9528 Miranda Road Raleigh, NC 27617	When was the debt incurred? 12/31/09	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Promissory Note	

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Debto	Winifred H Lynch	Case number (if known) 20-7	70352
4.2	Maylena M. Rinda	Last 4 digits of account number	\$6,306.67
	Nonpriority Creditor's Name 215 Mayors Lane Wendell, NC 27591	When was the debt incurred? 12/31/09	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you	did not
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Promissory Note	
4.2	Paypal Credit/SYNCB	Last 4 digits of account number 2700	\$4,736.17
	Nonpriority Creditor's Name P.O. Box 960006 Orlando, FL 32896-0006	When was the debt incurred? 2020	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you report as priority claims	did not
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit Card	
4.2	Pinnacle Recovery, Inc.	Last 4 digits of account number 4713	\$1,867.37
	Nonpriority Creditor's Name P.O. Box 130848	When was the debt incurred?	
	Carlsbad, CA 92013  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you	did not
	No	report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	- NO	Collection account for dues and	
	☐ Yes	Other. Specify maintenance fees for timeshare	

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Debtor	1 Winifred H Lynch	Case number (if known) 20-70352	
4.2	Receivables Outsourcing, LLC  Nonpriority Creditor's Name P.O. Box 549 Timonium, MD 21094  Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes	Last 4 digits of account number 1222  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Collection account for medical bills	\$20.00
4.2	Receivables Outsourcing, LLC	Last 4 digits of account number 5645	\$60.00
4	Nonpriority Creditor's Name P.O. Box 549 Timonium, MD 21094 Number Street City State Zip Code Who incurred the debt? Check one.	When was the debt incurred?  As of the date you file, the claim is: Check all that apply	Ψ00.00
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collection account for medical bills	
4.2	Rose A. Riedell Nonpriority Creditor's Name	Last 4 digits of account number	\$6,612.34
	184 Kibler Lake Road Flinton, PA 16640	When was the debt incurred? 12/31/09	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	Other. Specify Promissory Note	
	163	Other. Specify Profilesory Note	

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Debto	or 1 Winifred H Lynch	Cas	se number (if known)	20-70352	
4.2	Sea Land Travel	Last 4 digits of account number 2	7AI		\$1,021.00
	Nonpriority Creditor's Name WSW Holdings 4023 Kennett Pike Suite 678	When was the debt incurred? 2	016-2020		
	Greenville, DE 19807  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: C	check all that apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured cla	nim:		
	$\square$ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation report as priority claims			
	■ No	☐ Debts to pension or profit-sharing pla	ans, and other similar de	ebts	
	Yes	Other. Specify Travel club me	embership		
4.2	Synchrony Bank/ Amazon	Last 4 digits of account number 3	886		\$645.49
	Nonpriority Creditor's Name PO BOX 960013	When was the debt incurred?	020		
	Orlando, FL 32896  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: C	heck all that apply		
	-	Поличи			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured cla	im:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation	on agreement or divorce	that you did not	
	■ No	☐ Debts to pension or profit-sharing pla	ans, and other similar de	ebts	
	Yes	Other. Specify Credit Card			
4.2	The Carlton Company, Inc.	Last 4 digits of account number 66	689		\$1,172.00
	Nonpriority Creditor's Name 2323 South Voss	When was the debt incurred?			
	Suite 460 Houston, TX 77057 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: C	heck all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured cla	im:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separatio report as priority claims	n agreement or divorce	that you did not	
	■ No	$\square$ Debts to pension or profit-sharing pla	ans, and other similar de	ebts	
	Yes		ount for dues and ees for timeshare		

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Debte	Winifred H Lynch	Case number (if known) 20-70352	
4.2	Timothy J. Hoetzlein  Nonpriority Creditor's Name	Last 4 digits of account number	\$6,306.67
	95030 Gentry Lane Fernandina Beach, FL 32034	When was the debt incurred? 12/31/09	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Promissory Note	
4.3	Wells Fargo Home Projects  Nonpriority Creditor's Name	Last 4 digits of account number 0648	\$2,250.79
	P.O. Box 51193 Los Angeles, CA 90051-5493	When was the debt incurred? 2020	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit Card	
4.3	William F. Hoetzlein	Last 4 digits of account number	\$6,306.67
	Nonpriority Creditor's Name 1811 Honeysuckle Road Raleigh, NC 27609	When was the debt incurred? 12/31/09	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Promissory Note	

#### Part 3: List Others to Be Notified About a Debt That You Already Listed

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Winifred H Lynch		Case number (if known)	20-70352
Bluegreen Vacation Club Bluegreen Resorts Management, Inc. P.O. Box 630980 Cincinnati, OH 45263-0980	Line 4.22 of (Check one):	☐ Part 1: Creditors with Priori ☐ Part 2: Creditors with Nonp	• O CO IS ROBOT LOSS RESPONSES
,	Last 4 digits of account number	9278	
Name and Address Club Exploria P.O. Box 150 Scottsdale, AZ 85252	On which entry in Part 1 or Part 2 did y Line 4.8 of (Check one):  Last 4 digits of account number	you list the original creditor?  Part 1: Creditors with Priori  Part 2: Creditors with Nonp  9144	
Name and Address Club Exploria P.O. Box 150 Scottsdale, AZ 85252	On which entry in Part 1 or Part 2 did the Line 4.9 of (Check one):  Last 4 digits of account number	you list the original creditor?  Part 1: Creditors with Priorit  Part 2: Creditors with Nonp.  9767	
Name and Address Conemaugh Memorial Medical Center P.O. Box 16243 Pittsburgh, PA 15242-0243	On which entry in Part 1 or Part 2 did the Line 4.23 of (Check one):  Last 4 digits of account number	you list the original creditor?  Part 1: Creditors with Priorit  Part 2: Creditors with Nonpo	
Name and Address Conemaugh Miners Memorial Hospital 290 Haida Avenue Hastings, PA 16646	On which entry in Part 1 or Part 2 did y Line 4.24 of (Check one):  Last 4 digits of account number	you list the original creditor?  Part 1: Creditors with Priorit  Part 2: Creditors with Nonpo	
Name and Address Conemaugh Physician Group 1086 Franklin Street Johnstown, PA 15905-4398	On which entry in Part 1 or Part 2 did y Line 4.10 of (Check one):  Last 4 digits of account number	you list the original creditor?  Part 1: Creditors with Priorit  Part 2: Creditors with Nonpo	•
Name and Address The Colony 1301 Atlantic Avenue Virginia Beach, VA 23451-3482	On which entry in Part 1 or Part 2 did y Line 4.28 of (Check one):  Last 4 digits of account number	you list the original creditor?  Part 1: Creditors with Priorit  Part 2: Creditors with Nonpo	•

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				1	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
otal laims					
om Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				1	Total Claim
otal laims	6f.	Student loans	6f.	\$	0.00
rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount	6i.	\$	103,490.57

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Debtor 1 Wini	fred	H Lynch	Case number (if known) 20-70352			
		here.				
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	103,490.57	

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Fill in this infor	rmation to identify your	case:			
Debtor 1	Winifred H Lynch		Lost Nove		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	WESTERN DISTRICT	OF PENNSYLVANIA		
Case number	20-70352				
(if known)					Check if this is an amended filing

#### Official Form 106G

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code State what the contract or lease is for

2.1 Joseph Hoetzlein 184 Kibler Lake Road Flinton, PA 16640 Residential lease

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Fill	in this information to identi	ify your cas	se:							
Del	otor 1 Wini	fred H Ly	nch							
	otor 2					_				
Uni	ted States Bankruptcy Cou	urt for the:	WESTERN DISTRICT	OF PENNSYLVANI	A					
Cas	se number 20-70352	!					Check if this is	:		
(If kn	nown)						☐ An amend	ed filing		
									ving postpetition e following date:	
O.	fficial Form 106	<u> </u>					MM / DD/	YYYY		
S	chedule I: You	r Inco	me							12/15
sup spo atta	as complete and accurate plying correct informatio use. If you are separated ch a separate sheet to the Describe Emple	n. If you a and your is form. O	re married and not filin spouse is not filing wit	g jointly, and your h you, do not inclu	spouse de infoi	is liv mati	ving with you, incl on about your sp	ude info ouse. If r	ormation about more space is	your needed,
1.	Fill in your employment information.	t		Debtor 1			Debtor	2 or non-	-filing spouse	
	If you have more than on		Francisco est atatua	☐ Employed			☐ Empl	☐ Employed		
	attach a separate page with information about additional employers.		Employment status Occupation	■ Not employed			☐ Not e	☐ Not employed		
	Include part-time, seasor self-employed work.	nal, or	Employer's name							
	Occupation may include or homemaker, if it applies		Employer's address							
			How long employed th	ere?						
Par	t 2: Give Details Ab	out Mont	hly Income							
E <b>sti</b> i spou	mate monthly income as use unless you are separat	of the dat	e you file this form. If y	ou have nothing to r	eport for	any	line, write \$0 in the	space. I	nclude your no	n-filing
	u or your non-filing spouse e space, attach a separate			mbine the informatio	n for all	empl	oyers for that perso	on on the	lines below. If	you need
							For Debtor 1	PER CHARLES INC.	ebtor 2 or iling spouse	
2.	List monthly gross wag deductions). If not paid n				2.	\$	0.00	\$	N/A	
3.	Estimate and list month	nly overtin	пе рау.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income	. Add line	2 + line 3.		4.	\$	0.00	\$_	N/A	

Official Form 106I Schedule I: Your Income page 1

Debt	or 1	Winifred H Lynch	-		Case number (if k	nown)	20-7	0352		
					For Debtor 1			Debtor 2		
	Cop	by line 4 here	4.		\$	0.00	\$_		N/A	
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a		\$	0.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		\$	0.00	\$		N/A	
	5c.	Voluntary contributions for retirement plans	5c.			0.00	\$_		N/A	
	5d.	Required repayments of retirement fund loans	5d.			0.00	. \$_		N/A	
	5e.	Insurance	5e.			0.00	. \$_		N/A	
	5f. 5g.	Domestic support obligations Union dues	5f.			0.00			N/A	
	5h.	Other deductions. Specify:	5g. 5h.		-	0.00			N/A N/A	
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		-		·			
7.			7.			0.00	. Ψ \$		N/A	
		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	0.00	Φ_		N/A	
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a.		\$300	0.00	\$		N/A	
	8b.	Interest and dividends	8b.		\$(	0.00	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		\$ (		\$		NI/A	
	8d.	Unemployment compensation	8d.		·	0.00	\$_		N/A N/A	
	8e.	Social Security	8e.		\$ 2,178		* *		N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.			0.00	\$		N/A	
	8g.	Pension or retirement income	8g.			.07	\$		N/A	
	8h.	Other monthly income. Specify:	_ 8h.	+	\$(	0.00	+ \$		N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	,	\$3,329	.07	\$		N/A	
10.	Calc	culate monthly income. Add line 7 + line 9.	10.	\$	3,329.07	+ \$		N/A =	s	3.329.07
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		_	0,020.01			10/2	<b>–</b>	0,020.01
	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ide contributions from an unmarried partner, members of your household, your refriends or relatives. Not include any amounts already included in lines 2-10 or amounts that are not acify:	depe				,	0.00		0.00
		the amount in the last column of line 10 to the amount in line 11. The resident that amount on the Summary of Schedules and Statistical Summary of Certain ies						12. \$	ombine	3,329.07 ed
13.	Do y	ou expect an increase or decrease within the year after you file this form? No.	?							income
		Yes. Explain: Debtor is expecting expenses to increase due to	infla	tic	on.					

Fill	in this information to identify y	our case:		1100 3100 200			
Del	btor 1 Winifred H I	_ynch			Ch	neck if this is:	
Dol	btor 2					•	
	pouse, if filing)						wing postpetition chapter f the following date:
Uni	ited States Bankruptcy Court for the	· WESTE	RN DISTRICT OF PENNS	SYLVANIA		MM / DD / YYYY	
			IN DIOTHOT OF TENNE	7127/14/7		WIWI7 BB7 TTTT	
	se number 20-70352 (nown)						
Ĺ							
0	fficial Form 106J						
S	chedule J: Your	Exper	ises				12/15
Be	as complete and accurate a ormation. If more space is no mber (if known). Answer eve	s possible eeded, atta	If two married people are	e filing together, bo form. On the top of	oth are ed any addi	qually responsible f tional pages, write	or supplying correct your name and case
Par 1.	nt 1: Describe Your Hous Is this a joint case?	ehold					
1.	No. Go to line 2.						
	Yes. Does Debtor 2 live	in a separ	ate household?				
	□ No	•					
	☐ Yes. Debtor 2 mu	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	hold of De	ebtor 2.	
2.	Do you have dependents?	□ No					
	Do not list Debtor 1 and Debtor 2.	Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the						□No
	dependents names.			Daughter		19	Yes
							□ No □ Yes
				-		_	□ Yes
							□ Yes
							□ No
						<u> </u>	☐ Yes
3.	Do your expenses include expenses of people other yourself and your depende	than $_{\square}$	No Yes				
Par	rt 2: Estimate Your Ongo	ing Monthl	y Expenses				
exp	timate your expenses as of y penses as of a date after the plicable date.	our bankrı	uptcy filing date unless ye	ou are using this fo lemental <i>Schedul</i> e	orm as a s J, check	supplement in a Cha the box at the top o	apter 13 case to report of the form and fill in the
	lude expenses paid for with						
	value of such assistance ar ficial Form 106I.)	id nave inc	luded it on Schedule I: Y	our income		Your exp	enses
4.	The rental or home owners	hin avnan	ees for your residence. In	oclude firet mortagae			
٦.	payments and any rent for the			icidde iii st mortgage	4.	\$	479.00
	If not included in line 4:						
	4a. Real estate taxes				4a.	\$	42.00
	4b. Property, homeowner				4b.		0.00
	<ul><li>4c. Home maintenance, re</li><li>4d. Homeowner's associa</li></ul>	100			4c.		100.00
5.	Additional mortgage paym			ne equity loans	4d. 5.		67.00 0.00

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Debtor 1 Winifred H Lynch		Case number (if know	vn) <b>20-70352</b>
. Utilities:			
6a. Electricity, heat, natural gas		6a. \$	257.00
6b. Water, sewer, garbage collection		6b. \$	115.00
6c. Telephone, cell phone, Internet, s	atellite, and cable services	6c. \$	367.00
6d. Other. Specify:		6d. \$	0.00
Food and housekeeping supplies		7. \$	350.00
Childcare and children's education c	osts	8. \$	0.00
Clothing, laundry, and dry cleaning		9. \$	70.00
Personal care products and services		10. \$	150.00
. Medical and dental expenses		11. \$	150.00
Transportation. Include gas, maintena	ace hus or train fare	· · · · · · · · · · · · · · · · · · ·	130.00
Do not include car payments.	ioo, bus of train fale.	12. \$	500.00
. Entertainment, clubs, recreation, nev	spapers, magazines, and books	13. \$	0.00
Charitable contributions and religiou		14. \$	30.00
. Insurance.			00.00
Do not include insurance deducted from	your pay or included in lines 4 or 20.		
15a. Life insurance		15a. \$	0.00
15b. Health insurance		15b. \$	0.00
15c. Vehicle insurance		15c. \$	202.00
15d. Other insurance. Specify:		15d. \$	0.00
Taxes. Do not include taxes deducted for	om your pay or included in lines 4 or 20		0.00
Specify:	only our pay of moladed in inice 4 of 20.	16. \$	0.00
Installment or lease payments:			0.00
17a. Car payments for Vehicle 1		17a. \$	284.00
17b. Car payments for Vehicle 2		17b. \$	0.00
17c Other Specify:		17c. \$	0.00
17d. Other. Specify:		17d. \$	0.00
	nce, and support that you did not report a		0.00
	hedule I, Your Income (Official Form 106I)		0.00
Other payments you make to support		·	0.00
Specify:		19.	0.00
	uded in lines 4 or 5 of this form or on Sci		e.
20a. Mortgages on other property		20a. \$	263.00
20b. Real estate taxes		20b. \$	0.00
20c. Property, homeowner's, or renter'	s insurance	20c. \$	0.00
20d. Maintenance, repair, and upkeep		20d. \$	0.00
20e. Homeowner's association or cond		20e. \$	0.00
	orimian addo	21. +\$	250.00
Other: Specify: Pet Expenses		Z1. TØ	250.00
Calculate your monthly expenses			
22a. Add lines 4 through 21.		\$	3,676.00
22b. Copy line 22 (monthly expenses fo	Debtor 2), if any, from Official Form 106J-2	\$	,
22c. Add line 22a and 22b. The result is	your monthly expenses	s —	3,676.00
The life and and about the	. juliani, expensed.		3,070.00
Calculate your monthly net income.			
23a. Copy line 12 (your combined more	thly income) from Schedule I.	23a. \$	3,329.07
23b. Copy your monthly expenses from	n line 22c above.	23b\$	3,676.00
23c. Subtract your monthly expenses f		00	240.00
The result is your monthly net inc	ome.	23c. \$	-346.93
Do you expect an increase or decrease For example, do you expect to finish paying for modification to the terms of your mortgage?  ☐ No.	se in your expenses within the year after your car loan within the year or do you expect yo	you file this form? ur mortgage payment to	increase or decrease because of a
	avecate funth on increase in a	an dua to lastical	
Yes. Explain here: <b>Debtor</b>	expects further increases in expens	es due to inflation	

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Fill in this inform	ation to identify your	case:		<b>大河,为是</b>	
Debtor 1	Winifred H Lynch				
	First Name	Middle Name	Last Name	_	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ban	kruptcy Court for the:	WESTERN DISTRICT	OF PENNSYLVANIA		
Case number (if known)	0-70352				☐ Check if this is an amended filing
Official Form					
Declarati	on About a	n Individual	<b>Debtor's Sch</b>	edules	12/15
You must file this obtaining money o	form whenever you fil	le bankruptcy schedules		laking a false stat	ement, concealing property, or 00, or imprisonment for up to 20
Did you pay	or agree to pay some	one who is NOT an attor	ney to help you fill out ban	kruptcy forms?	
■ No					
☐ Yes. Na	me of person				kruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
	of perjury, I declare true and correct.	that I have read the sum	mary and schedules filed v	with this declaration	on and
X /s/ Winif	red H Lynch		X		
Winifred	H Lynch of Debtor 1		Signature of De	ebtor 2	

Date April 20, 2022